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PTO/SB/01 (12-97)  
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	8485-AFP (GDM)
	<b>First Named Inventor</b>	Jayprakash C. Bhatt
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	10/151,432
	<b>Filing Date</b>	May 20, 2002
	<b>Group Art Unit</b>	not yet assigned
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		not yet assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**THERMAL IMAGING SYSTEM**

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **May 20, 2002** as United States Application Number or PCT International Application Number **10/151,432** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None	None		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/294,486	May 30, 2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/364,198	March 13, 2002	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
None		

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Customer Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span> <span style="margin-left: 10px;">→</span> <div style="border: 1px solid black; padding: 2px; text-align: center; width: 100px; float: right;">Place Customer Number Bar Code Label here</div>			
<input checked="" type="checkbox"/> Registered practitioner(s) name/registration number listed below			
Name	Registration Number	Name	Registration Number
Gaetano D. Maccarone	25,173		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Name	Gaetano D. Maccarone, Esq.				
Address	Polaroid Corporation				
Address	784 Memorial Drive				
City	Cambridge	State	MA	ZIP	02139
Country	U.S.	Telephone	781-386-6405	Fax	781-386-6435

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname		
Jayprakash G.			Bhatt		
Inventor's Signature				Date	6/18/02
Residence: City	Waltham	State	MA	Country	US
Post Office Address	84 Milner Street				
Post Office Address	Same				
City	Waltham	State	MA	ZIP	02451
				Country	US

☒ Additional inventors are being named on the   3   supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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PTO/SB/02A (11-00)

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Brian D.		Busch	
Inventor's Signature		Date <u>6/18/02</u>	
Residence: City    Sudbury	State    MA	Country    US	Citizenship    US
Mailing Address    582 Penkham Road			
Mailing Address    Same			
City    Sudbury	State    MA	ZIP    01776	Country    US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Daniel P.		Bybell	
Inventor's Signature		Date <u>6/18/02</u>	
Residence: City    Medford	State    MA	Country    US	Citizenship    US
Mailing Address    40 Warren Street			
Mailing Address    Same			
City    Medford	State    MA	ZIP    02155	Country    US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
F. Richard		Cottrell	
Inventor's Signature		Date	
Residence: City    Westport	State    MA	Country    US	Citizenship    US
Mailing Address    109 Petsey Lane			
Mailing Address    Same			
City    Westport	State    MA	ZIP    02790	Country    US

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>2</u> of <u>3</u>
--------------------	---

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Anemarie				DeYoung			
Inventor's Signature						Date	6/18/02
Residence: City	Lexington	State	MA	Country	US	Citizenship	US
Post Office Address	6 Raymond Street						
Post Office Address	Same						
City	Lexington	State	MA	ZIP	02420	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Chien				Liu			
Inventor's Signature						Date	6/18/02
Residence: City	Wayland	State	MA	Country	US	Citizenship	Taiwan
Post Office Address	27 Amey Road						
Post Office Address	Same						
City	Wayland	State	MA	ZIP	01778	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Stephen J.				Telfer			
Inventor's Signature						Date	6/18/02
Residence: City	Arlington	State	MA	Country	US	Citizenship	UK
Post Office Address	40 College Avenue						
Post Office Address	Same						
City	Arlington	State	MA	ZIP	02474	Country	US

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jay E.		Thornton	
Inventor's Signature <i>Jay E. Thornton</i>		Date <i>6/19/02</i>	
Residence: City Watertown	State MA	Country US	Citizenship US
Mailing Address 56 Lincoln Street			
Mailing Address Same			
City Watertown	State MA	ZIP 02472	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
William T.		Vetterling	
Inventor's Signature <i>William T Vetterling</i>		Date <i>6/18/2002</i>	
Residence: City Lexington	State MA	Country US	Citizenship US
Mailing Address 35 Turning Mill Road			
Mailing Address Same			
City Lexington	State MA	ZIP 02420	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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	<b>Application Number</b>	10/151,432
	<b>Filing Date</b>	May 20, 2002
	<b>Group Art Unit</b>	not yet assigned
<input type="checkbox"/> Declaration Submitted with Initial Filing	<b>OR</b>	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		not yet assigned

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**THERMAL IMAGING SYSTEM**

the specification of which  
☐ is attached hereto  
**OR**  
☒ was filed on (MM/DD/YYYY) **May 20, 2002** as United States Application Number or PCT International Application Number **10/151,432** and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None	None		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
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60/364,198	March 13, 2002	

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
None		

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Customer Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> → <span style="border: 1px solid black; padding: 2px; font-size: small;">Place Customer Number Bar Code Label here</span> OR <input checked="" type="checkbox"/> Registered practitioner(s) name/registration number listed below			
Name	Registration Number	Name	Registration Number
Gaetano D. Maccarone	25,173		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Name	Gaetano D. Maccarone, Esq.				
Address	Polaroid Corporation				
Address	784 Memorial Drive				
City	Cambridge	State	MA	ZIP	02139
Country	U.S.	Telephone	781-386-6405	Fax	781-386-6435

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname		
Jayprakash C.			Bhatt		
Inventor's Signature					Date
Residence: City	Waltham	State	MA	Country	US
Post Office Address	84 Milner Street				
Post Office Address	Same				
City	Waltham	State	MA	ZIP	02451
				Country	US

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Brian D.		Busch	
Inventor's Signature			Date
Residence: City	Sudbury	State	MA
		Country	US
Mailing Address			
582 Peakham Road			
Mailing Address			
Same			
City	Sudbury	State	MA
		ZIP	01776
		Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Daniel P.		Bybell	
Inventor's Signature			Date
Residence: City	Medford	State	MA
		Country	US
Mailing Address			
40 Warren Street			
Mailing Address			
Same			
City	Medford	State	MA
		ZIP	02155
		Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
F. Richard		Cottrell	
Inventor's Signature			Date
<i>F. Richard Cottrell</i>			<i>21 June 2002</i>
Residence: City	Westport	State	MA
		Country	US
Mailing Address			
109 Pettey Lane			
Mailing Address			
Same			
City	Westport	State	MA
		ZIP	02790
		Country	US

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>2</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Anemarie				DeYoung			
Inventor's Signature						Date	
Residence: City	Lexington	State	MA	Country	US	Citizenship	US
Post Office Address	6 Raymond Street						
Post Office Address	Same						
City	Lexington	State	MA	ZIP	02420	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Chien				Liu			
Inventor's Signature						Date	
Residence: City	Wayland	State	MA	Country	US	Citizenship	Taiwan
Post Office Address	27 Amey Road						
Post Office Address	Same						
City	Wayland	State	MA	ZIP	01778	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Stephen J.				Telfer			
Inventor's Signature						Date	
Residence: City	Arlington	State	MA	Country	US	Citizenship	UK
Post Office Address	40 College Avenue						
Post Office Address	Same						
City	Arlington	State	MA	ZIP	02474	Country	US

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jay E.		Thornton	
Inventor's Signature		Date	
Residence: City    Watertown	State    MA	Country    US	Citizenship    US
Mailing Address    56 Lincoln Street			
Mailing Address    Same			
City    Watertown	State    MA	ZIP    02472	Country    US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
William T.		Vetterling	
Inventor's Signature		Date	
Residence: City    Lexington	State    MA	Country    US	Citizenship    US
Mailing Address    35 Turning Mill Road			
Mailing Address    Same			
City    Lexington	State    MA	ZIP    02420	Country    US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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